

ARIZONA STATE BOARD OF HEALTH
BUREAU OF VITAL STATISTICS
STANDARD CERTIFICATE OF BIRTH

State File No. **117**
Registered No. **35**

1. PLACE OF BIRTH

County Gila State ARIZONA
District or Township _____ or Village _____
City MIAMI No. 3003 Loomis Ave St. _____ Ward _____
(If birth occurred in a hospital or institution, give its NAME instead of street and number)
(If child is not yet named, make supplemental report, as directed.)

2. Full name of child Eulalia Ballesteros
3. Sex of Child male To be answered ONLY in event of plural births. 4. Twin, triplet or other. _____ 5. Legitimate? yes 7. Date of birth Feb 12 1932
Month Day Year

8. FATHER
Full name Rita Ballesteros

14. MOTHER
Full maiden name Angela Lopez

9. Residence (Usual place of abode) MIAMI, ARIZONA
If non-resident, give place and state.

15. Residence (Usual place of abode) MIAMI, ARIZONA
If non-resident, give place and state.

10. Color or race Mexican 11. Age at last birthday 29 (Years)

16. Color or race Mexican 17. Age at last birthday 22 (Years)

12. Birthplace (city or place) Salmonville
(State or country) Arizona

18. Birthplace (city or place) Mexico
(State or country)

13. Occupation miner
Nature of industry Copper

19. Occupation Housewife
Nature of industry

20. Number of children of this mother, 5
(Taken as of time of birth of child herein certified and including this child.)
(a) Born alive and now living 5
(b) Born alive but now dead 0
(c) Stillborn 0 21. Were precautions taken against ophthalmia neonatorum? yes

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

I hereby certify that I attended the birth of this child, who was alive at 10¹⁰ A m., on the date above stated.
(Born alive or stillborn.)

* When there was no attending physician or midwife, then the father, householder, etc., should make this return. A stillborn child is one that neither breathes nor shows other evidence of life after birth.

Signature F. F. Miller
F. F. MILLER, M.D.
(Physician or midwife.)

Given name added from a supplemental report. _____ Address MIAMI, ARIZONA

Filed March 2, 1932 Charles E. Loomis
Registrar

522-212-139 Registrar

MARGIN RESERVED FOR ENDING

WRITE PLAINLY WITH UNFADING INK—THIS IS A PERMANENT RECORD
N. B.—In case of more than one child at a birth, a SEPARATE RETURN must be made for each, and the number of each in order of birth stated.